

# No Spoiler Alert Here: Technology Top CMS Priority

Last week, Centers for Medicare and Medicaid Services (CMS) Administrator Seema Verma sat down with American Hospital Association (AHA) President and CEO Rick Pollack for a discussion about CMS' 2018 priorities. What followed was an enlightening conversation centering on innovation and responsiveness to patients – without overburdening providers with bureaucratic responsibilities, especially small, rural offices.

Luckily, the whole thing is [available here](#), on the AHA website. But since you may not have the time to watch the webcast—though we suggest you do—here are our takeaways and some key quotes from Verma:

- \* “CMS is conscious of working with providers to reduce regulatory burden. “CMS puts out 11,000 pages of regulations every year. I’m not sure how the healthcare system has been dealing with this over the years, but we are dedicated to trying to address that issue.”
- \* “We need to prepare for a new generation of beneficiaries. Especially in our Medicare program where we know this is a more tech savvy population that’s coming into the program.”
- \* “It’s up to IT to provide the innovative solutions the next generation will expect. How can we prepare and how can we give them the tools that they’re going to expect – they’re going to expect more of an Amazon experience. Our focus is going to be on both modernizing the Medicare and the Medicaid program.”
- \* The specific needs of rural providers will not be ignored. I understand they might just need more time or more technical assistance around implementations, or some things just may not make sense in a rural area. We’re trying to have as much

flexibility as possible to accommodate both rural and urban providers.”

Did you catch it? At the center is one main theme—technology. It is going to be how we address regulatory burden, modernize our systems, and expand rural health. And we’re very excited about our role in these priorities. Stay tuned for future posts on CNSI’s plans to contribute.



**AHA Regulatory Priorities**

**Regulatory Relief Actions**

The balance between flexibility in patient care and regulatory burden seems to have reached a tipping point. The Centers for Medicare & Medicaid Services (CMS) and other agencies of the Department of Health and Human Services (HHS) released 40 hospital-related proposed and final rules in the first 10 months of the year alone, comprising almost 27,000 pages of text. In addition to the sheer volume, the scope of changes required by the new regulations is inspiring in reducing the field's ability to absorb them. Moreover, this does not include the increasing use of technology guidance (FPCA, Stage, etc.) to implement new administrative policies.

There are numerous duplicative and excessive rules and regulations. The AHA supports the following actions to streamline, reduce burdens on hospitals and centers. These regulations are categorized by CMS (Table 1), other agencies within HHS (Table 2), and other departments of the federal government (Table 3).

**Table 1. Actions to be Taken by CMS**

Actions	Description
<b>Regulatory relief: rule ratings</b>	Health care providers have a right to be heard. CMS established a list of priority issues to be resolved by CMS. The list includes a list of priority issues to be resolved by CMS. The list includes a list of priority issues to be resolved by CMS. The list includes a list of priority issues to be resolved by CMS.
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